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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of: Illinois	
(State)	Chapter you are filing under:
· · · · · · · · · · · · · · · · · · ·	✓ Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Roxanne	
	Write the name that is on	First name	First name
	your government-issued picture identification (for example, your driver's	Middle name Freeman	Middle name
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Roxanne	
	have used in the last 8 years	First name	First name
	Include your married or	Middle name	Middle name
	maiden names.	Henley Last name	Last name
		Roxanne	Last Harrie
		First name	First name
		Middle name Jones	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX2554	xxx - xx
	Security number or federal Individual	OR	OR
	Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Hoxanne First Name	Freeman Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		15415 S. Harlem Ave, Apt. 218 Number Street	Number Street
		Orland Park Illinois 60462	
		City State Zip Code Cook	City State Zip Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		· ·	
		Number Street	Number Street
		City State Zip Code	City State Zip Code
_		City State Zip Code	State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	btor 1 Roxanne		Freeman	Cas	se number <i>(if knov</i>	vn)		
	First Name	Middle Name	Last Name					
Pa	Part 2: Tell the Court About Your Bankruptcy Case							
	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief des Bankruptcy (Form B2010)). Chapter 7 Chapter 11 Chapter 12 Chapter 13				§ 342(b) for Individuals Filing for priate box.		
	How you will pay the fee	more details about ho cashier's check, or mo may pay with a credit of the latest to pay the fee andividuals to Pay You. I request that my fee judge may, but is not at the official poverty line.	w you may pay. Typically oney order If your attornard or check with a present in installments. If you caur Filing Fee in Installments be waived (You may represent to, waive your fee that applies to your fan, you must fill out the angle of the payment of the	ly, if you a mey is su perinted a choose the ents (Office equest thi fee, and r mily size	are paying the abmitting your address. his option, signicial Form 103/his option only may do so only and you are un	the clerk's office in your local court for fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)		
	Have you filed for bankruptcy within the last 8 years?	Ves. District District District		When MI When	M / DD / YYYY	Case number Case number Case number		
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District		When	M / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known		
	Do you rent your residence?	✓ No. Go to line Yes. Fill out In	e 12.	_		you want to stay in your residence? * You (Form 101A) and file it with		

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Debtor 1 Roxanne Freeman __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Roxanne
 Freeman
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Roxanne Freeman Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Roxanne Freeman Signature of Debtor 1 Signature of Debtor 2 Executed on 2/1/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Roxanne		Freeman	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12	, or 13 of title 11, Unite	nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. § 3	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the i	nformation in the sched	dules filed with the petition is incorrect.
attorney, you do not	· ·	1 7		•
need to file this page.	/s/ Morsheda Hash	em	Date	2/1/2017
	Signature of Attorney			MM / DD / YYYY
	Morsheda Hashem			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	enue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3122374973	Email address	mhashem@semradlaw.com
			- -	
	Bar number		State	

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Fill in this information to identify your case:							
Debtor 1	Roxanne		Freeman				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Sankruptcy Court for the:	Northern	District of Illinois				
			(State)				
Case number (If known)							

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$6,325.00
1c. Copy line 63, Total of all property on Schedule A/B	\$6,325.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$12,936.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$16,532.32
Your total liabilities	\$29,468.32
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$2,079.00
Copy your combined monthly income from line 12 of Schedule I	
5. Schedule J: Your Expenses (Official Form 106J)	

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Freeman Debtor 1 Roxanne _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,525.00 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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			Decament 1 ago 10 of of	
Fill in this	information to ider	tify your case:		
Debtor 1	Roxanne		Freeman	
Debtor 2	First Name	Middle N	lame Last Name	
(Spouse, if fi	ling) First Name	Middle N	lame Last Name	
United Sta	ates Bankruptcy Cou	irt for the: Northern	District of Illinois (State)	
Case num (If known)	ber		. ,	
Officia	l Form 106	A/B		Check if this is an amended filing
Sche	dule A/B: F	Property		12/1
category v responsibl write your	where you think it e for supplying co name and case no	fits best. Be as complete a rrect information. If more s ımber (if known). Answer e	st an asset only once. If an asset fits in more th nd accurate as possible. If two married people a pace is needed, attach a separate sheet to this very question. nd, or Other Real Estate You Own or Have	are filing together, both are equally form. On the top of any additional pages,
1. Do you	own or have any	egal or equitable interest	in any residence, building, land, or similar prope	erty?
~	No. Go to Part 2			
	Yes. Where is the p	roperty?		
1.1	Street address, if a	vailable, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> <i>Creditors Who Have Claims Secured by Property.</i>
			Condominium or cooperative	Current value of the Current value of the
			Manufactured or mobile home	entire property? portion you own?
	Number Stree	<u> </u>	Land	Book the theory of the control of
	Inve	Investment property Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
	City	State Zip Code	Other	——————————————————————————————————————
			Who has an interest in the property? Check one.	Check if this is community property (see instructions)
			Debtor 1 only	_
			Debtor 2 only	
			Debtor 1 and Debtor 2 only	
			At least one of the debtors and another	
			Other information you wish to add about this i property identification number:	item, such as local
If you	own or have more t	han one, list here:		
			What is the property? Check all that apply.	Do not deduct secured claims or exemptions. Put
1.2	Street address, if a	vailable, or other description	Single-family home	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
		,	Duplex or multi-unit building	Current value of the Current value of the
			Condominium or cooperative Manufactured or mobile home	entire property? portion you own?
			Land	
	Number Stree	t	Investment property	Describe the nature of your ownership
			Timeshare	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
	City	State Zip Code	Other	
			Who has an interest in the property? Check one.	Check if this is community property (see instructions)
			Debtor 1 only	<u> </u>
			Debtor 2 only	
			Debtor 1 and Debtor 2 only	
			At least one of the debtors and another	
			Other information you wish to add about this i property identification number:	item, such as local

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Debtor 1	Roxanne	Freeman Case numb	Der (if known)
	First Name Middle	Name Last Name	
1.3Stre	et address, if available, or other descripti	what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
Nun City	nber Street State Zip Code	Land Investment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item property identification number:	Check if this is community property (see instructions) n, such as local
	the dollar value of the portion you o ve attached for Part 1. Write that nu	wn for all of your entries from Part 1, including any entr	ies for pages
Do you ow you own t	nat someone else drives. If you lease a v ns, trucks, tractors, sport utility vehicles	Interest in any vehicles, whether they are registered or vehicle, also report it on Schedule G: Executory Contracts an , motorcycles	•
3.1	Make Ford Model: Fiesta Year: 2013	Who has an interest in the property? Check one. ✓ Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Approximate mileage: 26000 Other information: 2013 Ford Fiesta: REAFFIRM	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property? Current value of the portion you own? \$5700.00 \$5700.00
		Check if this is community property (see instructions)	
3.2	Make Model: Year:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> <i>Creditors Who Have Claims Secured by Property.</i>
	Approximate mileage: Other information:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Current value of the entire property? ———————————————————————————————————

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2 2	Roxanne First Name	Middle Name	Freeman Last Name	Case number	(if known)	
3.3	Make Model: Year: Approximate mileage: Other information:	Middle Name	Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	perty? Check	the amount of any secu	claims or exemptions. Pured claims on Schedule lims Secured by Property. Current value of the portion you own?
			At least one of the debtors an Check if this is community instructions)			
3.4	Make Model: Year: Approximate mileage:		Who has an interest in the proone. Debtor 1 only Debtor 2 only	perty? Check	the amount of any secu	claims or exemptions. Pured claims on Schedule Lims Secured by Property. Current value of the
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community		entire property?	portion you own?
4.1	No Yes Make Model:		Who has an interest in the pro	perty? Check	Do not deduct secured the amount of any secu	•
	Year: Approximate mileage: Other information:	<u> </u>	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar	nd another	Creditors Who Have Clar Current value of the entire property?	
4.2	Make Model:		Check if this is community instructions) Who has an interest in the proone.		Do not deduct secured the amount of any secu	claims or exemptions. P
	Year:		Debtor 1 only		Creditors Who Have Cla	red claims on Schedule
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar		Current value of the entire property?	

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Debtor 1 Roxanne Freeman Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods and Furniture \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$550.00 for Part 3. Write that number here

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Freeman Debtor 1 Roxanne Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$25.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: JP Morgan Chase \$50.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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Deb ⁻	tor 1 Roxanne	Middle Nesse	Freeman	Case number (if known)	
20.	Negotiable instruments i	Middle Name orate bonds and other negotia nclude personal checks, cashiers	checks, promissory no	tes, and money orders.	
	Non-negotiable instrume No No Yes. Give specific information about them	ents are those you cannot transfe	er to someone by signine	g or delivering them.	
21.), thrift savings accounts	s, or other pension or profit-sharing plans	
	Yes. List each account	Type of account:	Institution name:		
	separately.	401(k) or similar plan: Pension plan:			
		IRA: Retirement account:			
		Keogh: Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, publi			
	✓ No		Institution name:		
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or fo	r a number of years)	
	✓ No ☐ Yes	Issuer name and description:			

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Debt	tor 1 Roxanne		Case number (if known)	
0.4		Ile Name Last Name	1.00 1 . 1 . 1 . 1 . 1 . 1	
24.	26 U.S.C. §§ 530(b)(1), 529A(b), and 52	ccount in a qualified ABLE program, or under a 29(b)(1).	qualified state tuition program.	
	No Institution name and description version in the last t	cription. Separately file the records of any interests.1	1 U.S.C. § 521(c):	
25.	Trusts, equitable or future interests in exercisable for your benefit	n property (other than anything listed in line 1), a	and rights or powers	
	No No			
	Yes. Describe			
26.		de secrets, and other intellectual property sites, proceeds from royalties and licensing agreemer	nts	
	✓ No ☐ Yes. Describe			
27.	Licenses, franchises, and other gene <i>Examples:</i> Building permits, exclusive lic	ral intangibles enses, cooperative association holdings, liquor licens	ses, professional licenses	
	✓ No Yes. Describe			
Mor	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or property owed to you? Tax refunds owed to you			portion you own? Do not deduct secured
				portion you own? Do not deduct secured
	Tax refunds owed to you ✓ No — Yes. Give specific information		Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you ✓ No		State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years		State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years	/, spousal support, child support, maintenance, divo	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony		State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years		State: Local: proce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony		State: Local: Drice settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony		State: Local: Proce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years		State: Local: Droce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insura		State: Local: Property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insura	y, spousal support, child support, maintenance, divo	State: Local: Property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Roxanne		Freeman	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance Examples: Health, disabi		alth savings account (HSA); credit, h	omeowner's, or renter's insurance	
	Yes. Name the insur of each policy and li		Company name:	Beneficiary:	Surrender or refund value:
32.		of a living trust, expect	someone who has died proceeds from a life insurance polic	y, or are currently entitled to receive	_
	✓ No Yes. Describe				
33.			you have filed a lawsuit or made urance claims, or rights to sue	a demand for payment	
	✓ No Yes. Describe				
34.	Other contingent and to set off claims	 unliquidated claims of	every nature, including counter	claims of the debtor and rights	
	No Yes. Describe				
35.	Any financial assets yo	u did not already list			
	No Yes. Describe				
36.		-	m Part 4, including any entries fo		\$75.00
Port	5. Describe Any Ru	siness-Related Pro	anarty You Own or Have an li	nterest In. List any real estate in Pa	p+ 1
Part					14.11
37.	No. Go to Part 6. Yes. Go to line 38.	y legal or equitable in	terest in any business-related pr	operty?	Current value of the portion you own? Do not deduct secured claims
38.	Accounts receivable o	r commissions you alr	eady earned		or exemptions
	✓ No Yes. Describe	·			
39.	Office equipment, furn Examples: Business-rela		e, modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, ele	ctronic devices
	✓ No Yes. Describe				

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Debt	tor 1 Roxanne	Freeman	Case number (if known)	
	First Name Middle Nan	ne Last Name		
40.	Machinery, fixtures, equipment, supplies yo	ou use in business, and tools of your tra	ade	
	✓ No			
	<u> </u>			
	Yes. Describe			
				
41.	Inventory			
	No No			
	Yes. Describe			
40	Interests in portnerships or joint ventures			
42.	Interests in partnerships or joint ventures			
	✓ No			
	Yes. Give specific	Name of entity:	% of ownership:	
	information about			
	them			
				<u> </u>
				_
43. (Customer lists, mailing lists, or other compil	ations		
	✓ No			
	Yes. Do your lists include personally identi	fighle information (so defined in 11 LLSC	£ 101(41A)\2	
	Tes. Do your lists include personally identify	nable information (as defined in 11 0.3.0.	. 9 101(4174)):	
	No			
	<u></u>			
	Yes. Describe			
11	Any hyginage related property you did not	alroady list		
44.	Any business-related property you did not a	aiready list		
	✓ No			
	Yes. Give specific			
	information			<u> </u>
				
				_
				
	dd the dollar value of all of your entries fron			
for Pa	art 5. Write that number here			
_	D	sial Fishing Balata d Boomasta Var		
Part	Describe Any Farm- and Commer If you own or have an interest in farmland, list		I Own or have an interest in.	
	ii you own or have an interest in familiand, list	it iii Fait 1.		
46.	Do you own or have any legal or equitable	interest in any farm- or commercial fis	shing-related property?	
	No. Go to Part 7			Current value of the
	No. Go to Part 7.			portion you own?
	Yes. Go to line 47.			Do not deduct secured claims
				or exemptions
47.	Farm animals			
	Examples: Livestock, poultry, farm-raised fish			
	☑ No			
	Yes. Describe			

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Debtor 1 Roxanne Freeman Case number (ff known)	
48. Crops-either growing or harvested	
V No	
Yes. Describe	
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
✓ No ☐ Yes. Describe	
Test. Describe	
50. Farm and fishing supplies, chemicals, and feed	
No	
Yes. Describe	
51. Any farm- and commercial fishing-related property you did not already list	
✓ No	
Yes. Describe	
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?	
Examples: Season tickets, country club membership No	
Yes. Give specific	
information	
54. Add the dollar value of all of your entries from Part 7. Write that number here	
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	
56. part 2 total vehicles, line 5 \$5700.00	
57.Part 3: Total personal and household items, line 15 \$550.00	
58.Part 4: Total financial assets, line 36 \$75.00	
59. Part 5: Total business-related property, line 45	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54	
62. Total personal property. Add lines 56 through 61	+ \$6325.00
Copy personal property total ▶	
63.Total of all property on Schedule A/B. Add line 55 + line 62	\$6325.00

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Roxanne		Freeman	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	<u> </u>
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(ciaic)	

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	Identity the Property You Clair	n as Exempt		
1.		•	, ,	
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)	
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)	
2.	For any property you list on Schedule A	/B that you claim as e	exempt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
		Copy the value from Schedule A/B		
	Brief description: Ford Fiesta, 2013, 2013 Ford Fiesta: REAFFIRM	\$5,700.00	\$0 100% of fair market value, up to any	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 03		applicable statutory limit	
	Brief	#000.00	_	735 ILCS 5/12-1001(b)
	description:	\$200.00	\$200.00	
	Misc. Electronics Line from Schedule A/B: 07		100% of fair market value, up to any applicable statutory limit	_
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?	

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Debtor 1 Roxanne Freeman Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$350.00 description: **✓** \$350.00 Misc. Household Goods 100% of fair market value, up to any and Furniture applicable statutory limit Line from Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief \$25.00 description: **✓** \$25.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(b) Brief \$50.00 description: \$50.00 Checking account, JP Morgan Chase 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 17

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Fill in this i	information to identify your ca	se:			
Debtor 1	Roxanne First Name	Freeman Middle Name Last Name			
Debtor 2 (Spouse, if fili		Middle Name Last Name			
United Sta		Northern District of Illinois			
		(State)			
Case num (If known)					
Officia	al Form 106D		<u> </u>		Check if this is an amended filing
Scho	dula D: Cradita	ors Who Have Claims Secur	ed by Pron	artv	12/15
more spac		le. If two married people are filing together, both are equal Page, fill it out, number the entries, and attach it to			
	ny creditors have claims se	ecured by your property?			
	No. Check this box and subm	it this form to the court with your other schedules. You ha	ave nothing else to rep	ort on this form.	
	Yes. Fill in all of the information	n below.			
	ist All Secured Claims				
		or has more than one secured claim, list the creditor	Column A	Column B	Column C
		nan one creditor has a particular claim, list the other creditors	Amount of claim	Value of	Unsecured
	· · · · · · · · · · · · · · · · · · ·	the claims in alphabetical order according to the creditor's	Do not deduct the	collateral	portion
nam	16.		value of collateral.	that supports this claim	If any
	TER FINANCE CORP	Describe the property that secures the claim:	\$12,936.00	\$5,700.00	\$7,236.00
	litor's Name). Box 166008	Ford Fiesta Value: \$5,700.00: REAFFIRM	٦		
	Number Street	As of the date you file, the claim is: Check all that apply	_		
		Contingent			
Irvii	ng TX 75016	Unliquidated			
City	State ZIP Code o owes the debt? Check one.	Disputed			
WIII	Debtor 1 only	Nature of lien. Check all that apply.			
H	Debtor 2 only	An agreement you made (such as mortgage or secure	d		
□ п	Debtor 1 and Debtor 2 only	car loan)			
	At least one of the debtors	Statutory lien (such as tax lien, mechanic's lien)			
	and another	Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	Other (including a right to offset)			
Dat	e debt was <u>5/1/2015</u>	Last 4 digits of account number1001			

Add the dollar value of your entries in Column A on this page. Write that number

incurred

here:

\$12,936.00

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Fill in th	s information to identify your ca	se:			
Debtor 1	Roxanne		Freeman		
	First Name	Middle Name	Last Name		
Debtor 2		NAC L III N			
(Spouse, it	filing) First Name	Middle Name	Last Name		
United S	states Bankruptcy Court for the:	Northern	District of Illinois		
Case nu	mher		(State)		
(If known)					
Offici	al Form 106E/F				Check if this is an amended filing
Be as co		le. Use Part 1 for credito	ors with PRIORITY claims	and Part 2 for creditors with	12/15 NONPRIORITY claims. List the
Form 100 claims tl	6A/B) and on Schedule G: Exec nat are listed in Schedule D: Cr	utory Contracts and Une editors Who Hold Claims	expired Leases (Official Fo	rm 106G). Do not include any lore space is needed, copy tl	on Schedule A/B: Property (Official y creditors with partially secured he Part you need, fill it out, number ite your name and case number (if
Part 1:	List All of Your PRIORITY	Unsecured Claims			
1. Do	any creditors have priority uns	secured claims against y	ou?		
✓	No. Go to Part 2.				
	Yes.				
listo As Co		s. If a claim has both priorit in alphabetical order accord than one creditor holds a	y and nonpriority amounts, I ling to the creditor's name. I particular claim, list the other	list that claim here and show be f you have more than two prio creditors in Part 3.	rately for each claim. For each claim oth priority and nonpriority amounts. rity unsecured claims, fill out the

Total

claim

Priority

amount

Nonpriority

amount

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Debtor 1 Roxanne Freeman Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 CAPITAL ONE \$906.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/1/2014 11013 W BROAD ST Number As of the date you file, the claim is: Check all that apply. Contingent GLEN ALLEN 23060 Virginia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes City of Country Club Hills Water Department \$151.05 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4200 183rd St Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Cntry Clb Hls Illinois 60478 Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Water Bill Is the claim subject to offset? **✓** No Yes COMENITY BANK/CARSONS \$603.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1314 PINELOG ROAD 9/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **AIKEN** South Carolina 29803 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts CreditCard Is the claim subject to offset? Other. Specify _ No Yes

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 Debtor 1 First Name
 Freeman Freeman
 Case number (if known)

 Last Name
 Last Name

After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
4 CRDTSHPINC Nonpriority Creditor's Name Po Box 1532 Number Street	Last 4 digits of account number 1405 When was the debt incurred? 9/1/2016 As of the date you file, the claim is: Check all that apply.	\$3,013.00
Austin Texas 78767 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify 36 InstallmentLoan	
CREDIT MANAGEMENT LP Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY Number Street CARROLLTON Texas 75007 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Last 4 digits of account number 2873 When was the debt incurred? 11/1/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	\$458.00
Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	debts Other. Specify	
FIRST PREMIER BANK Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 Number Street c/o Kelly Lukason Saint Cloud Minnesota 56302 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard	\$881.00

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 Debtor 1 First Name
 Freeman Freeman
 Case number (if known)

 Last Name
 Last Name

	After listing any entries on this page, number them beginning	with 4.5 followed by 4.6, and so forth	Total claim
4 7	FST PREMIER	g with 4.5, followed by 4.5, and 30 forth.	
4.7	Nonpriority Creditor's Name	Last 4 digits of account number 2706	\$507.00
	3820 N LOUISE AVE	When was the debt incurred? 2/1/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	SIOUX FALLS South Dakota 57107	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No	_	
	Yes		
4.8	Nicor Gas	l and d dimite of account women on	\$400.00
	Nonpriority Creditor's Name	Last 4 digits of account number	
	90 N. Finley Road Number Street	When was the debt incurred? n/a	
	Trumbol Chook	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Glen Ellyn Illinois 60137	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other. Specify Gas Bill	
	Is the claim subject to offset?	<u> </u>	
	✓ No		
	Yes		
4.0	<u> </u>		****
4.9	Nicor Home Solutions Nonpriority Creditor's Name	Last 4 digits of account number	\$630.38
	Po Box 3042	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		Unliquidated	
	Naperville Illinois 60566 City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify Due	
	Is the claim subject to offset?		
	✓ No		
	Yes		

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Debtor 1 Roxanne Freeman Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 PERSONAL FINANCE CO \$2,939.00 Last 4 digits of account number Nonpriority Creditor's Name 17507 SOUTH KEDZIE When was the debt incurred? 5/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent HAZEL CREST Illinois 60429 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 025 InstallmentLoan Is the claim subject to offset? **✓** No Yes 4.11 PLS Financial Solutinos of Illinois, Inc \$1,621.89 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4031 B W. 183rd St Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60478 Country Club Hills Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Payday Loan Is the claim subject to offset? **✓** No Yes RISE 4.12 \$4,156.00 Last 4 digits of account number 7418 Nonpriority Creditor's Name PO Box 101808 When was the debt incurred? 10/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent 76185 Fort Worth Texas Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 23 InstallmentLoan Is the claim subject to offset?

✓ No Yes

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Debtor 1 Roxanne Freeman __ Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SYNCB/TJX COS 4.13 \$266.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? 9/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent **ORLANDO** 32896 Florida Unliquidated State City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt CreditCard Other. Specify ____ Is the claim subject to offset? **✓** No Yes

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Debtor 1 Roxanne Freeman Case number (if known)

FIRST Na	me Middle Name Last Name			
Part 4: Add t	ne Amounts for Each Type of Unsecured Claim			
	amounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting	purpos
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that	6d.	\$0.00	
	amount here. 6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
	oor rotain rida iiiloo da tiiroagii oai	00.		
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$16,532.32	
	6i Total Add lines 6f through 6i	6i	\$16,532.32	

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First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Northern District of Illinois
(State)
Case number (If known)

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or compa	any with whom you have	e the contract or lease	State what the contract or lease is for
Place Sr, Thomas Name			Residential Lease, Debtor is Lessee, Yearly Lease
Number	Street		
City	State	Zip Code	

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			Do	cument ray	COLO	O1	
Fill in	this infor	mation to identify your c	ase:			4	
Debt	or 1	Roxanne		Freeman			
		First Name	Middle Name	Last Name			
Debt							
(Spou	se, if filing)	First Name	Middle Name	Last Name			
Unite	ed States E	Bankruptcy Court for the:	Northern	District of Illinois			
_				(State)			
Case (If kno	number wn)						
						Check if this	s is an
						amended fil	
Off	ficial	Form 106H					
	TOTAL	1 01111 1 0 0 1 1					
Sch	nedul	e H: Your Cod	lebtors				12/15
Codo	htore are	noonlo or ontities who	are also liable for any de	ate you may have Be a	s complete	e and accurate as possible. If two married people are	
		• •	-	-	-	needed, copy the Additional Page, fill it out, and num	
			tach the Additional Page	to this page. On the t	op of any A	Additional Pages, write your name and case number ((if
know	n). Answe	r every question.					
1.	Do you ha	ve any codebtors? (If yo	ou are filing a joint case, do	not list either spouse as	a codebtor.	.)	
	√ No						
	Yes						
, ,	└─ │ \#/:+b:m.+b.	last Overen have ver	lived in a semanualty and		O (Commu	nity property atotac and towitaries include Arizona Californ	nio.
			kico, Puerto Rico, Texas, W			nity property states and territories include Arizona, Californ	ııa,
		Go to line 3.	,,	J .,	,		
	Ŭ Yes.	Did your spouse, forme	er spouse, or legal equiva	lent live with you at the	time?		
		No	or operator, or regar equive	ionicinto tital you at allo			
		-	v etato or torritory did voi	ı livo?	Eill in t	the name and current address of that person.	
	Ш	165. III WHICH COMINGIN	y state or territory and you	I IIVG:	FIII III I	the hame and current address of that person.	
		Name of vour angues of	armar anauga, ar lagal agu	volont			
		Name of your spouse, i	ormer spouse, or legal equ	valent			
		Number Street					
		City	State	Zip C	ode		
∣3. ∣	In Column	ı 1, list all of your codel	otors. Do not include you	[,] spouse as a codebtor	if your spo	ouse is filing with you. List the person shown in line 2	2

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2
again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D),
Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this information	to identify your case:					
Debtor 1 Roxanne		Freem	nan			
First Nam	e Middle I			— Che	eck if this is:	
Debtor 2					An amended filing	
(Spouse, if filing) First Nam	e Middle N	Name Last N	lame		· ·	
United States Bankrupto	y Court for Northern	District of III			A supplement snowing expenses as of the foll	gpost-petition chapter 1 owing date:
the: Case number		(3	State)		•	_
(If known)					MM / DD / YYYY	
Official Form	1061					
Schedule I: Y	our Income					12/-
_				•		•
Fill in your employm	ent	Debtor 1	1		Debtor 2	
information.	Employment sta	tus Emplo	oved		Employed	
If you have more than attach a separate page	one job,		mployed		Not Employed	
information about add	itional	<u> </u>				
employers.	Occupation				-	
Include part time, seas self-employed work.	onal, or Employer's name	e			-	
Occupation may inclu	Employer's addre					
or homemaker, if it ap		Number St	reet		Number Street	
					_	_
		City	Stat	e Zip Code	City	State Zip Code
	How long employ	yed				
	there?				-	_
Part 2: Give Details	About Monthly Incom	e				
0.110						
Estimate monthly incompose unless you are s	ome as of the date you file t eparated.	this form. If you have	nothing to repo	ort for any line, v	write \$0 in the space. In	nclude your non-filing
	spouse have more than one en eparate sheet to this form.	mployer, combine the			or that person on the lin	nes below. If you need
			For I	Debtor 1	non-filing spouse	
	wages, salary, and commission aid monthly, calculate what the		2.	\$0.00		_
3. Estimate and list n	onthly overtime pay.		3.	+ \$0.00		<u> </u>
4. Calculate gross inc	come. Add line 2 + line 3.		4.	\$0.00	_	

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Debt		Freeman	Case numbe	r <i>(if</i>	
	First Name Middle Name I	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Co	py line 4 here	→ 4.	\$0.00		
	st all payroll deductions:				
5a	a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		
5b	Mandatory contributions for retirement plans	5b.	\$0.00		
50	. Voluntary contributions for retirement plans	5c.	\$0.00		
50	. Required repayments of retirement fund loans	5d.	\$0.00		
5e	. Insurance	5e.	\$0.00		
5f.	. Domestic support obligations	5f.	\$0.00		
5g	. Union dues	5g.	\$0.00		
5h	n. Other deductions. Specify:	5h. +	\$0.00 +	· .	
6. Ad +5h.	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5	f + 5g 6.	\$0.00		
7. Ca	Iculate total monthly take-home pay. Subtract line 6 from line	94. 7.	\$0.00		
	t all other income regularly received:				
8a	n. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing				
	gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00		
8b	o. Interest and dividends	8b.	\$0.00		
80	E. Family support payments that you, a non-filing spouse, or dependent regularly receive	a			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00		
80	d. Unemployment compensation	8d.	\$0.00		
	. Social Security	8e.	\$554.00		
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	8f.	\$0.00		
80	Pension or retirement income	8g.	\$1,525.00		
	a. Other monthly income. Specify:	8h. +	\$0.00 +		
	d all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g -		\$2,079.00		
	_	L	-		
	alculate monthly income. Add line 7 + line 9. Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp	10. pouse	\$2,079.00	=	\$2,079.00
In o	tate all other regular contributions to the expenses that you clude contributions from an unmarried partner, members of your ends or relatives.	household, your	dependents, your roomr		
	pecify:	anto triat are not a	valiable to pay experious	11.	+ \$0.00
_					Ψσ.σσ
	dd the amount in the last column of line 10 to the amount i rite that amount on the Summary of Schedules and Statistical Su				\$2,079.00
					Combined monthly income
13. D	o you expect an increase or decrease within the year after	you file this form	?		
<u>_</u>	No.				
	Yes. Explain:				

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		Docu	iment Page 34 of 6	7	
Fill in this infor	mation to identify your	case:			
Debtor 1	Roxanne First Name	Middle Name	Freeman Last Name		
Debtor 2	First Name	Middle Name	Last Name	Check if this is:	
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filir	ng
	Bankruptcy Court for the:	Northern [District of Illinois (State)		howing post-petition chapter 13 the following date:
Case number (If known)				MM / DD / YYYY	/
Official	Form 106J				
Schedul	e J: Your Exp	enses			12/15
information. If			re filing together, both are equal form. On the top of any addition		
Part 1: Des	cribe Your Househo	old			
1. Is this a joi	nt case?				
✓ No. Go	to line 2				
Yes. D	oes Debtor 2 live in a s	separate household?			
	No				
	Yes. Debtor 2 must fi	ile Official Forms 106J-2, <i>Expen</i>	ses for Separate Household of Deb	tor 2.	
2. Do you hav	e dependents?	lo			
Do not list D Debtor 2.		es. Fill out this information for ach dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
expenses o	penses include f people other	lo			
than yourself and dependents	u youi	'es			
Part 2: Esti	mate Your Ongoing	Monthly Expenses			
-	of a date after the bank		rou are using this form as a supp plemental Schedule J, check the		
	-	cash government assistance it on Schedule I: Your Income	-		Your expenses
	I or home ownership ex or the ground or lot. 4.	xpenses for your residence. In	clude first mortgage payments and		\$950.00
	uded in line 4:				••

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Roxanne Freeman Case number (if known)
First Name Middle Name Last Name

5. Additional mortgage payments for your residence, such as home equity loans 5. \$0.00 6. Utilities: 6 \$0.00 6. Utilities: 6 \$40.00 6b. Validar, sewer, gurbage collection 6b. \$0.00 6c. Toliphone, oil phone, Internat, satellite, and cable services 6c. \$75.00 6d. Other, Specify: 6d. \$0.00 7. Food and housekeeping supplies 7. \$250.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, Laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 11. \$80.00 11. Medical and dental syeneses 11. \$80.00 12. Transportation, include gag, maintenance, bus or train fare. 12. \$100.00 Do not include car payments 14. \$9.00 15. Insurance. 15. \$1.00 \$1.00 16. Charitable contributions and religious donations 14. \$9.00 15. It will insurance 15a \$0.00 15. Whicke insurance 15a \$0.00 16. Valid	riistivaine	Middle Name Last Name		
6. Utilities: 6. Electricity, heat, natural gas 6a. \$40,00 6b. Water, sower, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$75.00 6d. Other. Specify: 6d. \$0.00 7. Food and housekeeping supplies 8. \$0.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 13. \$0.00 15. Insurance. 15. \$0.00 15. Insurance. 15a \$0.00 15c. Vehicle insurance deducted from your pay or included in lines 4 or 20. \$0.00 15c. Vehicle insurance. 15a \$0.00 15c. Vehicle insurance. \$0.00 15c. Vehicle insurance.				Your expenses
6a. Electricity, heat, natural gas 6a. \$40.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Teappon, coll phone, internet, satellities, and cable services 6c. \$75.00 6d. Other. Specify: 6d. \$50.00 7. Food and housekeeping supplies 7. \$250.00 8. Childcare and children's education costs 9. \$375.00 10. Personal care products and services 10. \$500.00 11. Medical and dental expenses 11. \$500.00 11. Medical and dental expenses 11. \$500.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 Do not include acr payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Instrationment, clubs, recreation, newspapers, magazines, and books 15. \$0.00 15. Instration include insurance 15. \$0.00 15. Instration include such such acreases and services 15. \$0.00 15. While insurance 15. \$0.00 15. While insurance 15. \$0.00	5. Additional mortgage paymer	its for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$75.00 6d. Other, Specity: 7. \$250.00 7. Food and housekceping supplies 7. \$250.00 8. Childcare and children's education costs 8. \$0.00 9. Chitting, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$550.00 11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 10. Do not include gas, maintenance, bus or train fare. 12. \$100.00 10. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance 15 \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insuranc	6. Utilities:			
6c. Telephone, cell phone, Intermet, satellite, and cable services 6c. \$75.00 6d. Other. Specify: 6d \$0.00 7. Food and housekeeping supplies 7. \$250.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.00 15b. Health insurance 15a \$0.00 15c. Vehicle insurance 15c \$130.00 15c. Vehicle insurance. 15c \$10.00 15c. Vehicle insurance. 15c \$10.00 15c. Vehicle insurance. \$0.00 \$0.00 15c. Vehicle insurance. \$0.00 \$0.00 15c. Vehicle insurance. \$0.00 \$0.00	6a. Electricity, heat, natural gas		6a.	\$40.00
6d. Other. Specify: 6d \$0.00 7. Food and housekeeping supplies 7. \$250.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$575.00 10. Personal care products and services 10. \$550.00 11. Medical and dental expenses 11. \$60.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$100.00 Do not include car payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15 \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a \$0.00 15b. Health insurance 15a \$0.00 15c. Vehicle insurance 15b \$0.00 15c. Vehicle insurance 15c \$130.00 15c. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17. Installment or lease payments: 17a \$0.00 </td <td>6b. Water, sewer, garbage coll</td> <td>ection</td> <td>6b.</td> <td>\$0.00</td>	6b. Water, sewer, garbage coll	ection	6b.	\$0.00
7. Food and housekeeping supplies 7. \$250.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$550.00 11. Medical and dental expenses 11. \$600.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15s \$0.00 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15s \$0.00 15c. Vehicle insurance. 15s \$0.00 15c. Vehicle insurance. 15c \$10.00 15c. Vehicle insurance. Specify: 15d \$0.00 15c. Vehicle insurance. Specify: 15d \$0.00 </td <td>6c. Telephone, cell phone, Inte</td> <td>ernet, satellite, and cable services</td> <td>6c.</td> <td>\$75.00</td>	6c. Telephone, cell phone, Inte	ernet, satellite, and cable services	6c.	\$75.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. Health insurance 15c. Vehicle insurance 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes payments for Vehicle 1 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c \$0.00 18. Your payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17c. Speci	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$60.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$100.00 Do not include car payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. neurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$130.00 15c. Vehicle insurance. Specify	7. Food and housekeeping supp	blies	7.	\$250.00
10. Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15a. Life insurance 15b. \$0.00 \$0.00 15b. Health insurance 15c. \$130.00 15c. Vehicle insurance 15c. \$130.00 15c. Vehicle insurance. Specify: 15c \$130.00 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: 15c \$0.00 15c. Vehicle insurance. 15c \$0.00 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: 15c \$0.00 17c. Car payments for Vehicle 1 17a \$3.42.00 17c. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c \$0.00 17c. Cother. Specify: 17c	8. Childcare and children's edu	cation costs	8.	\$0.00
11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 \$0.00 \$0.00 15c. Vehicle insurance. Specify: 15c. \$130.00 \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in Velice 2. 17b. \$0.00 \$0.0	9. Clothing, laundry, and dry cl	eaning	9.	\$75.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$130.00 15c. Vehicle insurance 15c \$130.00 15c. Vehicle insurance 15c \$130.00 15d. Cher insurance. Specify: 15d \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c \$130.00 17. Installment or lease payments: 16 \$0.00 17. Installment or lease payments: 17a \$342.00 17b. Car payments for Vehicle 1 17a \$342.00 17c. Other. Specify: 17c \$0.00 17c. Other. Specify: 17c \$0.00 18. Your payments for Vehicle 2 17b \$0.00 19. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20b. Real estate taxes. 20b \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 20d. 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 20d.	10. Personal care products and	Services	10.	\$50.00
Do not include car payments 13. 13. 13. 13. 13. 13. 13. 13. 13. 13. 14. 14. 15. 13. 14. 15. 15. 14. 15.	11. Medical and dental expens	es	11.	\$60.00
14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 30.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$0.00 15b. Lefleth insurance 15b. \$0.00 15b. \$0.00 15c. Vehicle insurance 15c. \$130.00 15d. Other insurance. Specify: 15d. \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 Specify: 16 17. Installment or lease payments: 17a. \$342.00 17b. Car payments for Vehicle 1 17a. \$342.00 17c. Other. Specify: 17c. \$0.00 17c. Other. Specify: 17c. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 19. \$0.00 Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20c. Mortgages on other property <td< td=""><td>-</td><td>maintenance, bus or train fare.</td><td>12.</td><td>\$100.00</td></td<>	-	maintenance, bus or train fare.	12.	\$100.00
15. Insurance.	13. Entertainment, clubs, recre	ation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.	14. Charitable contributions an	d religious donations	14.	\$0.00
15b		cted from your pay or included in lines 4 or 20.		· · · · · · · · · · · · · · · · · · ·
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:			15c	\$130.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$342.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 \$0.00	16. Taxes. Do not include taxes of	leducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.	17. Installment or lease payme	nts:		
17c. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17a. Car payments for Vehicle	1	17a	\$342.00
17d. Other. Specify:	17b. Car payments for Vehicle	2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20c \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00			17d	\$0.00
19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00				\$0.00
Specify:		·	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	, , ,	o support others who do not live with you.	10	\$0.00
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20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	, , , ,		20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	20c. Property, homeowner's,	or renter's insurance		
	20d. Maintenance, repair, and	upkeep expenses.		
	20e. Homeowner's association	n or condominium dues	20e	\$0.00

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Debtor 1 Roxa			Freeman	Case number (if known)		
First N	lame	Middle Name	Last Name			
21. Other. Spe	cify:				21	\$0.00
	your monthly expense	S.				\$2,072.00
	nes 4 through 21.					\$0.00
, ,	` , ,	,, ,,	from Official Form 106J-2			\$2,072.00
22c. Add lir	ne 22a and 22b. The res	ult is your monthly exp	enses.		22.	
23. Calculate	your monthly net incor	me.				
23a. Copy	ine 12 (your combined r	monthly income) from S	Schedule I.		23a	\$2,079.00
23b. Copy	your monthly expenses	from line 22 above.			23b	\$2,072.00
	ct your monthly expense		icome.			\$7.00
The re	sult is your monthly net	income.			23c	
			oan within the year or do yonodification to the terms of			

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Roxanne		Freeman	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to I	help you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and
×	/s/ Roxanne Freeman	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 2/1/2017	Date
	MM/DD/YYYY	MM/DD/YYYY

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Debto			case:			
	r 1 Roxar	ine		Freeman		
	First N	lame	Middle Na	ame Last Nam	e	
Debto (Spouse	r 2 e, if filing)	lame	Middle Na	ame Last Name	e	
United	l States Bankrup	tcy Court for the	e: Northern	District of Illinoi		
	number			(State	e) 	
(If know	n)					Check if this is
Offi	cial For	n 107				amended filing
Stat	ement of	Financi	al Affairs fo	or Individuals I	Filing for Bankrup	icy 12/
inform	nation. If more er (if known). /	space is need Answer every	ded, attach a separ question.	rate sheet to this form.	On the top of any additional	oonsible for supplying correct pages, write your name and case
Part 1	Give Detai	ls About You	r Marital Status a	and Where You Lived	Before	
1.	What is your cu	rrent marital s	status?			
	Married					
	✓ Not marrie	d				
2.	During the last	3 years, have	you lived anywhere	other than where you liv	e now?	
	□ No					
		of the places	you lived in the last 3	3 years. Do not include w	where you live now.	
	_					
	Debtor 1:			Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
	Debtor 1.					
	Debtor 1.				Same as Debtor 1	Same as Debtor 1
	18605 Bec	ker Ter			Same as Debtor 1	
				From	Same as Debtor 1 Number Street	From
	18605 Bec			From		
	18605 Bec	eet	60478		Number Street	From To
	18605 Bec Number Sti	eet	60478 Zip Code			From
	18605 Bec Number Sti Country Clu Hills	eet ıb Illinois			Number Street	From To
	18605 Bec Number Str Country Clu Hills City	eet ub Illinois State			Number Street City State Same as Debtor 1	From To Zip Code
	18605 Bec Number Sti Country Clu Hills	eet ub Illinois State		То	Number Street City State	From To Zip Code Same as Debtor 1
	18605 Bec Number Str Country Clu Hills City	eet ub Illinois State		To	Number Street City State Same as Debtor 1	From To Zip Code

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Debtor 1 Roxanne Freeman Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions exclusions) and exclusions) Est. YTD Pension \$1,525.00 From January 1 of current year until Est. YTD SSI \$554.00 the date you filed for bankruptcy: Est. Pension \$18,300.00 For last calendar year: Est. SSI \$6,648.00 (January 1 to December 31, 2016 \$18,300.00 Est. Pension For the calendar year before that: Est. SSI \$6,648.00 (January 1 to December 31, 2015

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Freeman Debtor 1 Roxanne __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or

vendors
Other

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or 1	Roxanne			Fre	eeman	Case number	(if known)
	First Name		Middle Name	Las	t Name		
nsi com age	ders include your porations of whic	relatives; a h you are a for a busin	iny general partners in officer, director, p less you operate as	; relatives of any person in control,	general partners; part or owner of 20% or	tnerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
✓	No						
	Yes. List all pay	ments to a	an insider.	D : (D ("'
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No	_	ranteed or cosigne		Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
							The state of the s
	City	State	Zip Code				

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Debtor 1 Roxanne Freeman Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Roxanne	Freeman	Case number (if known)	
	First Name Middle Nar	me Last Name		_
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment be		ank or financial institution, set off any am	ounts from your
	✓ No Yes. Fill in the details.			
	_	Describe the action the	e creditor took Date action was taken	Amount
	Creditor's Name			
	Number Street			
		Last 4 digits of account i	number: XXXX-	
	City State Zip Co	ode		
12.	Within 1 year before you filed for bankrupte appointed receiver, a custodian, or another		possession of an assignee for the benefit o	of creditors, a court-
	✓ No ☐ Yes			
Part	t 5: List Certain Gifts and Contribution	ns		
13.	Within 2 years before you filed for bankru		otal value of more than \$600 per person?	
	No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Co	ode		
	Person's relationship to you			
	Person to Whom You Gave the Gift			-
	Number Street			
	City State Zip Co	ode		

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	Roxanne		Freeman	Case number (if know	(1))	
	First Name	Middle Name	Last Name		·	
Wi	thin 2 years before you filed for	r bankruptcy, did	you give any gifts or contributions	with a total value of	of more than \$600	to any charity?
V	No					
È	ı Yes. Fill in the details for each	a gift or contribution	ממ			
L	res. I iii iii tile details for each	rgiit or contributio	JI I.			
	Gifts or contributions to char	rities	Describe what you contributed	i	Date you	Value
	that total more than \$600				contributed	
	Charity's Name					
	Number Street					
	City State	Zip Code				
6:	List Certain Losses					
Wit	hin 1 year before you filed for l	bankruptcy or sin	ce you filed for bankruptcy, did you	u lose anything bed	ause of theft, fire,	other disaster, or
gaı	nbling?					
✓	No					
Ш	Yes. Fill in the details.					
	Describe the property you los	st and	Describe any insurance covera		Date of your	Value of property
	how the loss occurred		Include the amount that insurance		loss	lost
			pending insurance claims on line A/B: Property.	33 of Schedule		
			жы. <i>Поре</i> ну.			
Wit	out seeking bankruptcy or prep	bankruptcy, did y paring a bankrupt	ou or anyone else acting on your b cy petition? r credit counseling agencies for service			anyone you consult
abo	thin 1 year before you filed for lout seeking bankruptcy or preglude any attorneys, bankruptcy po	bankruptcy, did y paring a bankrupt	cy petition?			anyone you consult
Wit	thin 1 year before you filed for lout seeking bankruptcy or preplude any attorneys, bankruptcy po	bankruptcy, did y paring a bankrupt	cy petition?		ankruptcy.	
Wit	thin 1 year before you filed for lout seeking bankruptcy or preglude any attorneys, bankruptcy po	bankruptcy, did y paring a bankrupt	cy petition? r credit counseling agencies for service Description and value of any presented to the country of the country o	es required in your ba	ankruptcy. Date payment	Amount of
Wit	thin 1 year before you filed for lout seeking bankruptcy or preglude any attorneys, bankruptcy po	bankruptcy, did y paring a bankrupt	cy petition? r credit counseling agencies for service	es required in your ba	Date payment or transfer	
Wit	thin 1 year before you filed for lout seeking bankruptcy or preplude any attorneys, bankruptcy polyon. No Yes. Fill in the details.	bankruptcy, did y paring a bankrupt	r credit counseling agencies for service Description and value of any prescription	es required in your ba	Date payment or transfer was made	Amount of payment
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Debtor	1 Roxanne		Freeman	Case number (if known)	
	First Name M	iddle Name	Last Name		
h	Ithin 1 year before you filed for ba elp you deal with your creditors or to not include any payment or transfe	to make payme	ents to your creditors?	our behalf pay or transfer any pr	operty to anyone who promised to
	No Yes. Fill in the details.				
	_		Description and value of a transferred	paym	ent or fer was
	Person Who Was Paid				
	Number Street				
	City State	Zip Code			
ti Ir	Vithin 2 years before you filed for be not ordinary course of your business and trained transfers and trained transfers that you have already listed. No Yes. Fill in the details.	s or financial af	fairs? ecurity (such as the granting of		
_	_		Description and value of a property transferred	Describe any prope payments received in exchange	
	Person Who Received Transfer				
	Number Street				
	City State Person's relationship to you	Zip Code			
	Person Who Received Transfer				
	Number Street				
	City State Person's relationship to you	Zip Code			
b	/ithin 10 years before you filed for eneficiary? These are often called asset-protection ✓ No		you transfer any property to	a self-settled trust or similar dev	rice of which you are a
Ē	Yes. Fill in the details.		Description and value of	the property transferred	Date transfer was
	Name of the				made
	Name of trust				

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Freeman Debtor 1 Roxanne Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Debtor 1 Roxanne Freeman Case number (if known) Middle Name First Name Identify Property You Hold or Control for Someone Else Part 9: 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb	tor 1	Roxanne			Fr	eeman	Cas	e number <i>(ii</i>	known)		
		First Name		Middle Name	La	st Name			-		
26.	Hav	e you been a part	y in any judic	cial or administr	ative proce	eding under	any environmen	ntal law? In	clude settler	ments and ord	ers.
	H	Yes. Fill in the det	tails								
	Ш	103.1 111 111 110 001	iaiio.		0			Matuus			Chatus of the
					Court or ag	ency		nature (of the case		Status of the case
		Case title									
					Court Nama						Pending
					Court Name						On appeal
		Case number			NumberStre	et	 -				П от арроа
											Concluded
					City	State	Zip Code				
Pari	t 11:	Give Details Al	out Vour F	Rusiness or Co	nnections	to Any Ru	cinocc				
ı aıı		GIVE Details A	Jour Tour E	003111033 01 00	JIII COLIOI K	o to Aily Du	311033				
27.	With	nin 4 years before	vou filed for	bankruptev. die	l vou own a	business or	have any of the	followina c	onnections t	o anv busines	s?
		•	•		•					, , , , , , , , , , , , , , , , , , , ,	
		A sole propri	etor or self-e	mployed in a tra	ade, profes	sion, or othe	r activity, either f	ull-time or p	oart-time		
		A member of	f a limited liab	oility company (L	LC) or limite	ed liability pa	artnership (LLP)				
		A partner in a	a partnership)							
		An officer, di	rector, or ma	naging executiv	e of a corp	oration					
		_		of the voting or e	-		ooration				
		Ш			-1						
	✓	No. None of the a	above applie	s. Go to Part 12							
		Yes. Check all that	at apply abov	ve and fill in the	details belo	w for each b	ousiness.				
					Desc	ribe the natu	re of the busine	ss	Employer I	dentification	number Do not
									include So	cial Security r	number or ITIN.
		Desires News			_				EIN:		
		Business Name									
		Number Street			_				Dates busi	iness existed	
					Name	of account	ant or bookkeep	er			
		City	State	Zip Code					From	To	
					Desc	ribe the natu	ure of the busine	ss			number Do not
									include So	cial Security r	number or ITIN.
		Business Name			_				EIN:		
		Dubiliess Name									
		Number Street			_				Dates busi	iness existed	
					Name	of account	ant or bookkeep	er			
		City	State	Zip Code					From	To	
					Desc	ribe the natu	ure of the busine	ss			number Do not
									include So	cial Security r	number or ITIN.
		Business Name			_				EIN:		
		Dusiness Name									
		Number Street			_				Dates busi	iness existed	
					Name	of account	ant or bookkeep	er			
		City	State	Zip Code	_		•		From	То	
		,									

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Deb	tor 1	Roxanne		Freeman	Case number (if known)
		First Name	Middle Name	Last Name	
28.		nin 2 years before yo ditors, or other partio No Yes. Fill in the details	es.	give a financial statement	to anyone about your business? Include all financial institutions,
				Date issued	
		Name		MM/DD/YYYY	
		Name			
		Number Street			
		0.1	01-1- 7'- 0-1-		
		City	State Zip Code		
Par	t 12:	Sign Below			
	true a	and correct. I unders kruptcy case can re	tand that making a false state sult in fines up to \$250,000, or	ment, concealing property imprisonment for up to 20	ts, and I declare under penalty of perjury that the answers are , or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/S/ R0	oxanne Freeman		· · · · · · · · · · · · · · · · · · ·
		Signature	of Debtor 1		Signature of Debtor 2
		Date 2/1	1/2017		Date
	✓ N ✓ Y Did ye	lo ´es ou pay or agree to pa	pages to Your Statement of Fi		als Filing for Bankruptcy (Official Form 107)?
		lo			Attach the Bankruptcy Petition Preparer's Notice,
	\sqcup	es. Name of person			Production and Signature (Official Form 110)

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Fill in this information to identify your case:							
Debtor 1	Roxanne		Freeman				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case number (If known)			(

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: EXETER FINANCE CORP Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Ford Fiesta | Value: \$5,700.00: REAFFIRM Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Roxanne		Freeman	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Pers	sonal Property Leases	S		
informa		state leases. Unexpired I	eases are leases that are	still in effect; the lease	eases (Official Form 106G), fill in the period has not yet ended. You may
Des	scribe your unexpired person	al property leases		Wi	II the lease be assumed?
Les	sor's name:] No] Yes
	scription of leased perty:				
Les	sor's name:] No] Yes
	scription of leased perty:				
Les	sor's name:] No] Yes
	scription of leased perty:				
Les	sor's name:] No] Yes
	scription of leased perty:				
Les	sor's name:			E] No] Yes
	scription of leased perty:				
Les	sor's name:] No] Yes
	scription of leased perty:				
Les	sor's name:] No] Yes
	scription of leased perty:				
Part 3:	Sign Below				
Unde			y intention about any pro	perty of my estate that	secures a debt and any personal
4.0			44		
_	/s/ Roxanne Freeman		Signat	ura of Dobtor 0	
SI	ignature of Debtor 1		Signati	ure of Debtor 2	
D	ate <u>2/1/2017</u> MM/DD/YYYY		Date	MM/DD/YYYY	
	וווו/טט/וווו			11111/00/1111	

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

		NOTUIEITI DIS	strict of illinois	
In re	Roxanne Freeman		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSAT	ION OF ATTORNEY	FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf	year before the filing of t	the petition in bankruptcy, or agreed	d to be paid to me, for services
	For legal services, I have agreed to a	ccept		\$1,400.00
	Prior to the filing of this statement I	have received		\$0.00
	Balance Due			\$1,400.00
2.	The source of the compensation paid	d to me was:		
	Debtor	Other (spec	cify)	
3.	The source of the compensation paid	d to me is:		
	✓ Debtor	Other (spec	sify)	
4.	I have not agreed to share the abmembers and associates of my I		ation with any other person unless t	they are
		w firm. A copy of the agre	n with a other person or persons whement, together with a list of the na	
5.	In return for the above-disclosed fee a. Analysis of the debtor's finar bankruptcy;		legal service for all aspects of the ba ring advice to the debtor in determin	
	b. Preparation and filing of any	petition, schedules, state	ements of affairs and plan which ma	y be required;
	c. Representation of the debtor	at the meeting of credito	ors and confirmation hearing, and an	ny adjourned hearings thereof;
6.	By agreement with the debtor(s), the	above-disclosed fee doe	s not include the following services	:
		CERTI	FICATION	
	certify that the foregoing is a comple or(s) in this bankruptcy proceedings.	te statement of any agree	ement or arrangement for payment to	o me for representation of the
	2/1/2017		/s/ Morsheda Hashem	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Freeman, Roxanne	Case No	
	Debtor(s)		
		Chapter.	Chapter7
	VERIFI	CATION OF CREDITOR MAT	RIX
Th knowledge		fy that the attached list of creditors is tru	ue and correct to the best of their
Date:	2/1/2017	/s/ Freeman, Rox	
		Freeman, Roxanı <i>Signature of Deb</i>	

EXETER FINANCE CORP P.O. Box 166008 Irving, TX, 75016

RISE PO Box 101808 Fort Worth, TX, 76185

CRDTSHPINC Po Box 1532 Austin, TX, 78767

PERSONAL FINANCE CO 17507 SOUTH KEDZIE HAZEL CREST, IL, 60429

CAPITAL ONE P O Box 30253 Salt Lake City, UT, 84130

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

COMENITY BANK/CARSONS 1314 PINELOG ROAD AIKEN, SC, 29803

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, SD, 57107

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

SYNCB/TJX COS PO BOX 965005 ORLANDO, FL, 32896

PLS Financial Solutinos of Illinois, Inc 4031 B W. 183rd St Country Club Hills, IL, 60478

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City of Country Club Hills Water Department 4200 183rd St Cntry Clb Hls, IL, 60478

Nicor Home Solutions Po Box 3042 Naperville, IL, 60566

Nicor Gas 90 N. Finley Road Glen Ellyn, IL, 60137

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,400.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial: R.F.

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 02/01/2017	
Client Jann Framan	Client
Attorney Mozh de Hanh	

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Debtor 1 Roxanne First Name	Free Middle Name Last N	man Case nu	mber (if known)
	estions for Reporting Purposes	матте	
16. What kind of debts do you have?	16a. Are your debts primarily con "incurred by an individual pri No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily but	marily for a personal, family siness debts? <i>Business de</i> stment or through the oper	<i>bts</i> are debts that you incurred to obtain ation of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund No.		exempt property is excluded and administrative to unsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 mil \$10,000,001-\$50 m \$50,000,001-\$100 n \$100,000,001-\$500	illion \$1,000,000,001-\$10 billion nillion \$10,000,000,001-\$50 billion
20. How much do you estimate your liabilities to be?		\$1,000,001-\$10 mil \$10,000,001-\$50 m \$50,000,001-\$100 u \$100,000,001-\$500	illion
Part 7: Sign Below			
For you	proceed, if eligible, under Chapter 7, 11,12, or 13 e under each chapter, and I choose to proceed someone who is not an attorney to help me fill d by 11 U.S.C. § 342(b). d States Code, specified in this petition.		
		can result in fines up to \$2	50,000, or imprisonment for up to 20 years, or
	Signature of Debtor 1		Signature of Debtor 2
	Executed on 2/1/2017 MM / DD / Y		Executed on

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Debtor 2 Spouse, if filings First Name Middle Name Last Name Middle Name Middle Name Last Name Middle Name Middle Name Last Name Middle Name Last Name Middle Name Middle Name Last Name Middle Name Middle Name Last Name Middle Name Middle Name Middle Name Last Name Middle Name Middl	Fill in this infor	mation to identify your ca	se:		
First Name	Debtor 1	Roxanne		Freeman	
Spouse, if filing First Name Middle Name Last Name			Middle Name		
United States Bankruptcy Court for the: Northern District of Illinois (State) Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		First Name	Middle Name	Last Name	
Case number ((Nerown)) Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	United States F	Sankruntey Court for the			
Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		James Court for the	·		
Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		****			
If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? NO Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Official	Form 106Dec	·	,	Check if this is amended filing
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Declarat	ion About an Iı	- ndividual Debto	r's Schedules	12/
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	If two married	people are filing together	, both are equally respons	sible for supplying correc	et information.
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. * Is/ Roxanne Freeman / Amany Teeman * Emany * Ema	Part 1: Sign	Below	no who is NOT on otherwise		
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. * /s/ Roxanne Freeman / Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		ay or agree to pay someo	ne who is NOT an attorney	y to neip you fill out bani	cruptcy forms?
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. ** Is/ Roxanne Freeman / January ** ** Is/ Roxanne	✓ No				
* Is/ Roxanne Freeman / Infamme Freeman *	Yes.	Name of person			•
* /s/ Roxanne Freeman / farmy freeman *					
	Under per that they	nalty of perjury, I declare are true and correct.	that I have read the summ	nary and schedules filed	with this declaration and
Signature of Debtor 1 Signature of Debtor 2		9 500 1 1	my treem	м 🗶	
	Signature o	of Debtor 1		Signature	of Debtor 2
Date 2/1/2017 Date MM/DD/YYYY					

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Deb	tor 1	Roxanne		Freeman		Case number (if known)
		First Name	Middle Name	Last Name		
28.	Witl	hin 2 years before y ditors, or other part	rou filed for bankruptcy ties.	η, did you give a financ	ial statement to a	nyone about your business? Include all financial institutions,
		No Yes. Fill in the deta	úls below.			
				Date issue	ed	
		Name		MM/DD/YYY	7	
		Number Street		*	•	
		City	State Zip Co	de		
Part	10,	Sign Below	•			
t	rue a	kruptcy case can re	stand that making a fa esult in fines up to \$25 oxanne Freeman	ilse statement, concea	iling property, or out for up to 20 year	nd I declare under penalty of perjury that the answers are obtaining money or property by fraud in connection with rs, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signatur	e of Debtor 1		S	Signature of Debtor 2
		Date 2	/1/2017		С	Date
E	oid yo		I pages to Your Staten	nent of Financial Affair	s for Individuals F	iling for Bankruptcy (Official Form 107)?
] ~	es				
D	id yo	ou pay or agree to p	ay someone who is no	t an attorney to help y	ou fill out bankrup	otcy forms?
E	Z N	0				·
Ľ	J Y	es. Name of person	-			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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First Name	ot yet ended. You may
rany unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Officiormation below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has a sume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be	ot yet ended. You may
rmation below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has nume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Lessor's name: Description of leased property:	ot yet ended. You may
Lessor's name: Description of leased property: Lessor's name: Description of leased property: Lessor's name: No Yes Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Description of leased property: Lessor's name: Description of leased property: Description of leased property:	e assumed?
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essor's name:	
Yes	
escription of leased roperty:	
essor's name:	
escription of leased roperty:	
: Sign Below	
der penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a deb perty that is subject to an unexpired lease.	
Is/ Roxanne Freeman Is/ Signature of Debtor 1 **Signature of Debtor 2	and any personal
Date 2/1/2017 Date MM/DD/YYYY	and any personal

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

e.	Debtor(s)	Case No	
		Chapter	Chapter7
	VERIF	ICATION OF CREDITOR MAT	TRIX
Tr knowledge	ne above named Debtors hereby ver e.	ify that the attached list of creditors is t	rue and correct to the best of their
Date:	2/1/2017	/s/ Freeman, Ro Freeman, Roxar Signature of Del	nne / www. / www.

1

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Debtor 1	Roxanne		Freeman	Case numbe	er <i>(if known)</i>			
	First Name	Middle Name	Last Name	*************************************	, ,			······································
				Column A Debtor 1		Column B Debtor 2 or non-filing spe	ouse	
8. Une n	nployment compens	sation		\$0.00		g op		
unde	r the Social Security A	f you contend that the amor Act. Instead, list it here:		-				
For y			\$554.00					
For y	our spouse		\$0.00					
	ion or retirement in fit under the Social Se	come. Do not include any accurity Act.	amount received that was	a \$ <u>1,525.00</u>			······	
amou paym intern	unt. Do not include a ents received as a vic	sources not listed above. S ny benefits received under the ctim of a war crime, a crime errorism. If necessary, list ot ow.	ne Social Security Act or against humanity, or	·			•	
Total	amounts from separ	ate pages if any		+\$0.00		+		
	·	urrent monthly income. Ac	ld lines 2 through 10 for] _ [1 1
each				\$1,525.00				\$1,525.00
col	umn. Then add the t	otal for Column A to the total	al for Column B.					
								Total current monthly income
Part 2:	Determine Whet	ther the Means Test A	onlies to You					monthly moonle
		monthly income for the ye						
	-	nt monthly income from line	•	•	Copy line	11 here →	Г	\$1,525.00
	Multiply by 12 (the n	umber of months in a year).					L	
		nual income for this part of t					12b.	X 12
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ina moonio ioi ano parcor	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				128. L	\$18,300.00
13 Calc	ulate the median fa	mily income that applies	to you. Follow these steps	3 :				
F:0 ·			Illinois	00°95*				
Fill in	the state in which yo	u live.		one or a contract of the contr				
Fill in	the number of peopl	e in your household.		il de la companya de				
	the median family incehold.	come for your state and size	of				13.	\$50,133.00
		median income amounts, g					•	
	do the lines compa	This list may also be availablure?	e at the bankruptcy clerk s	onice.				
	· ·		th a tan af age 4 - the all l					
14a.	Go to Part 3.	han or equal to line 13. On	the top of page 1, check i	oox 1, 1 nere is no presump	tion of adu	ise.		
14b.		than line 13. On the top of fill out Form 122A-2.	page 1, check box 2, The	e presumption of abuse is d	etermined	by Form 122A	N-2.	
Part 3:	Sign Below					-		
By s	igning here, I declare	under penalty of perjury tha	at the information on this s	statement and in any attachr	nents is tr	ue and correct.		
		1 1						
		11/1/1	·-					
×	/s/ Roxanne Freem	ian RUMANNO Tre	emm	×				
5	Signature of Debtor 1	//		Signature of Debtor 2				
г	Date 2/1/2017			Date 2/1/2017				
	MM/DD/YYYY			MM/DD/YYYY				
		, do NOT fill out or file Form , fill out Form 122A-2 and f		· down			576.40	